

**Confidential Disclosure Form for Candidates for Advisory Panels  
at the U.S. Environmental Protection Agency Science Advisory Board (SAB)**

General Instructions

**A. Why You Must File**

*This report is a safeguard for you as well as the Government. It provides a mechanism for determining whether there is a statutory conflict between your public responsibilities and your private interests and activities or the appearance of such a conflict. This allows you and the SAB Staff to make appropriate decisions.*

**B. Who Must File**

*Special Government Employees providing advice to the EPA Science Advisory Board must file this form as well as candidates who wish to be considered for such service.*

**C. Confidentiality of Information Provided on this Form**

*Title I of the Ethics in Government Act of 1978 (5 U.S.C. App.) Executive Order 12674, and 5 CFR Part 2634, Subpart I, of the Office of Government Ethics regulations require the reporting of this information. The primary use of the information on this form is for review by Government officials at EPA to determine compliance with applicable Federal conflict of interest laws and regulations. Additional disclosures of the information on this report may be made: (1) to a Federal, State or local law enforcement agency if the disclosing agency becomes aware of a violation or potential violation of law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (3) to a source when necessary to obtain information relevant to a conflict of interest investigation or decision; (4) to the National Archives and Records Administration or the General Services Administration in records management inspections; (5) to the Office of Management and Budget during legislative coordination on private relief legislation; and (6) in response to a request for discovery or for the appearance of a witness in a judicial or administrative proceeding, if the information is relevant to the subject matter. This confidential report will not be disclosed to any requesting person unless authorized by law.*

**D. When to file**

*You must file annually, not later than October 31. In addition, you must file when you are a candidate for a new Science Advisory Board Advisory activity, if you believe any of the answers to the questions below may have changed.*

**E. Where to file**

*Send your response to:*

**U.S. EPA Science Advisory Board**  
EPA Science Advisory Board  
Mailcode 1400A

U.S. Environmental Protection Agency  
1200 Pennsylvania Avenue, NW  
Washington, D.C. 20460  
For Deliveries and Overnight Mail include the Room Number 6450-AA; zip 20004

*F. General Instructions*

*Filers must provide sufficient information about outside interests and activities so that Agency ethics officials can make an informed judgment on conflict of interest.*

*You must include information applicable to yourself and your spouse on Parts 1-5, and for yourself, your spouse, and dependent children on Part 6. This is required because their financial interests are attributed to you under ethics rules in determining conflict of interest. Information about your spouse is not required in the case of divorce, permanent separation, or temporary separation with the intention of terminating the marriage or permanently separating. You may distinguish any entry for a family member by preceding it with S for spouse, DC for dependent child, or J for jointly held.*

Reporting Individual's Name

Last Name	First Name and Middle Initial

Certification:

I certify that the statements I have made on this form and all attached statements are true, complete, and correct to the best of my knowledge.

Signature of Reporting Individual

Signature	Date

Date received by the Agency:

Signature of Designated Federal Officer or Other Intermediate Reviewer and Date:

Signature	Date

Signature of Agency's Final Reviewing Official and Title and Date:

Signature	Date

Comments of Review Official appended (check one)

Y	N
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Part 1: Statement regarding any change since annual submission of this form.

*Fill out this section only (1) if you have submitted an OGE-45XX "Confidential Disclosure Form for Candidates for Advisory Panels at the U.S. Environmental Protection Agency Science Advisory Board (SAB)" in the past year and (2) if you have reviewed your last submitted form OGE-450XX have identified that no information has changed.*

I have reviewed my OGE 450xx Form, "Confidential Disclosure Form for Candidates for Advisory Panels at the U.S. Environmental Protection Agency Science Advisory Board (SAB)" submitted on the date indicated and find that (check column that applies)

Date of OGE 450XX filed	Check if no information has changed from that reported previously

Part 2: Employment

*Report any position, whether or not compensated, that you or your spouse have held in the preceding twenty-four months from the date of filing. Positions include (but are not limited to) an employee, officer, director, trustee, general partner, proprietor, representative, or executor of a business, non-profit, labor organization, or educational institutions. Also include any organization or person with whom you are negotiating with or have an arrangement with concerning prospective employment. Exclude positions with religious, social, fraternal or political entities or those solely of an honorary nature.*

*Report any salary and earned income if the position which meets the following conditions: (1) For yourself, report all sources of salary and earned income greater than \$2,500 during the reporting period. (2) For your spouse, report all sources of salary and earned income if greater than \$2,500.*

Beginning and ending dates position was held	Organization (Name, State, and City)	Position and brief description of work	Salary range (Check column that applies)
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			0	\$5,000 # salary <\$2,500	salary \$2,500

### Part 3: Research Support

*Report any funding you or your spouse has received for research from any source, including government, industry, and foundations (for any purpose, including advocacy) in the preceding twenty-four months from the date of filing if, for that funding, you or your spouse are the Principal Investigator or Significant Collaborator. The "percent of time" devoted to the grant is to be estimate by the filer.*

Beginning and ending dates of support	Funding Organization (Name, State, and City)	Indicate whether you are Principal Investigator or Significant Collaborator) and provide a brief description of project.	Indicate whether funding is through a grant or contract (check column that applies)		Percent of time devoted to the grant (Check column that applies)		
			Grant	Contract	time #25%	25% <time #75%	75% <time #100%

### Part 4: Consulting Activities

*Report any consulting activities you or your spouse have held in the preceding twenty-four months from the date of filing. For clients who provide more than 25% of your funding, please identify those clients.*

Beginning and ending dates of consulting relationship	Funding Organization (Name, State, and City) and Their Principal Affected Clients	Brief description of work (and clients if any single activity provides more than 25% of your funding).	Fee range (Check column that applies to total received during dates specified)			
			#\$25,000	\$25,000 <fee # \$50K	\$50k <fee # \$100,000	<\$100,000

#### Part 5: Expert Testimony

*Report any expert testimony you or your spouse have provided in the preceding twenty-four months from the date of filing.*

Dates of testimony	For what Person or Organization (Name, State, and City)?	Brief description of issue and testimony and citation to the testimony, if available	Fee range (Check column that applies to total received during dates specified)			
			#\$25,000	\$25,000 <fee # \$50,000	\$50,000 <fee # \$100,000	>\$100,000

#### Part 6: Assets: Stocks, Bonds, Real Estate, Business

*Report all assets held by you, your spouse, and dependent children that had a fair market value greater than \$5,000 in the*

*preceding twelve months from the date of filing.*

*For pensions, you will ordinarily just need to indicate the name of the sponsoring employer. However, if you have control over the specific investment assets held in your pension account (it is not independently managed), you must also list those underlying investments or attach an account statement that lists them.*

*For publicly available mutual funds, you need to indicate the full name of the specific mutual fund. You are not required to indicate the investments that the mutual fund holds in its portfolio. Indicate whether the fund is diversified (i.e., it does not have a policy of concentrating its investments in an industry, business, country other than the United States, or single State within the United States) or whether it is a Fund with a Business or Industry Focus, or a Fund with a Geographic Focus.*

*For other publicly available investment funds, such as publicly offered units of limited partnerships, list the full name of the limited partnership, but not its underlying portfolio investments.*

*For a privately held trade or business, report its name, location and description of activity.*

*For real estate, give the type and location.*

Full Name of Investment (including location of privately held businesses or real estate)	(x) if no longer held	Valuation of Reported Assets at close of reporting period (check column that applies)		
		\$5,000 < assets # \$25,000	\$25,000 < assets # 50,000	> \$50,000

Part 7: Liabilities

*Report for you, your spouse, and dependent children liabilities over \$10,000 owed at any time in the preceding twelve months from the date of filing (over \$10,000 at the end of the period if revolving charge accounts). Exclude a mortgage on your personal residence, unless it is rented out; loans for autos, household furniture or appliances; and liabilities owed to certain family members.*

Creditors (Name, state and city)	Type of Liability

Part 8: Identification of any other competing interests or appearance of competing interest

*Please consider all your activities, those of your spouse, and dependent children over the past 5 years in considering the following questions.*

- A. Do you know of any reason that you might be unable to provide impartial advice on this matter or any reason that others might think you would be unable to provide impartial advice? **If yes, please describe those reasons. If no, please check this box: 9.**
- B. Do you know of any matter associated with your association with this review that might cause you, the Science Advisory Board, or the U.S. Environmental Protection Agency embarrassment, if it were to come to light? **If yes, please describe the matter. If no, please check this box: 9.**
- C. If you were to participate in this activity, would you be reviewing your own work or work that you have reviewed previously for another organization? If yes, please explain. If no, please check this box: 9..
- D. Will you be able to provide independent scientific advice free of constraints imposed by your employer? **If no, please explain. If yes, please check this box: 9.**